

**MEDICAL DIRECTION COMMISSION**  
**MINUTES**  
**April 21, 2006**  
**150 North 18<sup>th</sup> Avenue, Suite 540**  
**Phoenix, AZ**

**Members Present**

Bentley Bobrow, Chairman  
Frank Walter  
John Gallagher  
Phil Richemont  
Thomas Wachtel  
Wendy Ann Lucid  
Harvey Meislin  
Daniel Spaite  
Michael Ward, teleconference

**Members Absent**

Carrie Walters  
John Raife

**I. CALL TO ORDER**

The Medical Direction Commission meeting was called to order at 9:10 a.m. A quorum was present.

**II. DISCUSSION and ACTION ON October 21, 2005 MINUTES**

A motion was made by Frank Walter and seconded by Thomas Wachtel to approve the minutes of October 21, 2006.

**Motion carried**

**III. REPORTS:**

**A. Report from the Office of the Director:**

1. Discussion and Status of Bureau of Emergency Medical Services, Public Health Preparedness Services, Division of Public Health Services, and Department of Health Services

Niki O'Keeffe, Assistant Director, reported that Susan Gerard, Director has been officially confirmed. It was reported that the Department is receiving questions from the legislature regarding the budget and will continue to be working with the legislature to answer these questions.

**B. Report from Acting Bureau Chief**

**1. Status of New Bureau Chief**

Will Humble, Deputy Assistant Director, reported that the Department has been recruiting for the Bureau Chief position. Several resumes were submitted and eight candidates were interviewed. Out of the eight candidates interviewed the Department has selected the final two candidates for the position. The goal of the Department is to make a final decision for the position by the end of April.

**2. Regional Council Leadership Meeting**

It was reported that the Bureau hosted its bi-annual Regional Leadership Conference. The highlight of the meeting was a presentation on the new computer based testing that will take effect on January 1, 2007 for the National Registry.

### **3. Status of Trauma System Development**

Vicki Conditt reported that there are seven level one designated trauma centers and numerous hospitals that have indicated an intent to be designated in the future. The trauma registry is moving forward and is in the final stages, which includes standardizing and converting all of the data. The Bureau anticipates having data by next month.

It was reported that the Bureau solicited proposals for trauma mini-grants in the amount of \$10,000 for facilities who could show they were conducting activities leading to ACS verification or state designation. The Procurement Office will notify the facilities that have been awarded the mini-grant.

The Bureau is working on the draft for the 2006-2010 EMS and Trauma System Plan. The Plan will be based on the HRSA Federal Model Trauma Planning and Evaluation document.

### **4. Announcement of Hospital Overcrowding and Diversion Workgroups**

It was reported that the Director has created four workgroups to address the issues with hospital overcrowding and diversion, and to try to create solutions. It was reported that a link has been added to the ADHS website for volunteers to sign up to be part of these workgroups. As of today, 110 individuals have volunteered and the workgroups are well represented and diverse.

### **C. Chairman's Report**

#### **1. Membership Update**

It was reported that Dr. Conn has resigned from his position. We are hopeful that Dr. Jeff Daniel will be assigned to his position by the Governor's Office.

## **IV. PROTOCOLS, MEDICATIONS AND DEVICES (PMD) COMMITTEE:**

### **A. Report from Dr. Gallagher**

Dr. Gallagher reported that PMD is working on the drug profiles, and the next meeting scheduled for May 11<sup>th</sup> will be a teleconference.

## **V. ARIZONA DEPARTMENT OF HEALTH SERVICES ITEMS:**

### **A. Update/Discussion on 2005 Statewide EMS and Trauma System Assessment**

Vicki Conditt reported that the Assessment had been sent out in mid-December. A delay was caused due to a concern of confidentiality. A new deadline of April 28th has been established to complete and return the assessments. It was reported that the Bureau will be organizing and analyzing the data once all assessments have been received. The Bureau will report the findings.

### **B. RSI Update**

Dr. Bobrow reported that not enough significant data has been submitted for the committee to review. He again encouraged promoting the reporting of field RSI data.

It was asked if a standard application was created to apply for performing RSI. Currently, no application is necessary for this procedure. The Bureau created a Substantive Policy Statement that includes requirements, although these requirements are recommendations only, and are unenforceable. Paramedics performing RSI is at the discretion of the medical director.

A question was asked if there is a legal implication to ADHS. It was reported that RSI is part of the National Curriculum, which Arizona has adopted; therefore it is within the paramedic scope of practice.

It was suggested to send another letter regarding RSI and emphasize the importance of reporting the data if RSI is being performed.

### **C. SHARE Program Update**

Dr. Bobrow reported that as of 2003, approximately 3.5 million people are covered under the fire departments that are submitting their data to the SHARE program.

It was reported that the data that has been collected has been reviewed and a couple of abstracts have been submitted to the American Heart Association.

An anonymous web survey has been created and is posted on the Bureau's SHARE website for EMTs. The survey will help identify how adult cardiac arrest care is approached and where there may be areas for improvement.

### **D. Report on EMS Week**

It was reported that on May 16, 2006, Channel 12 will be reporting on EMS Week all throughout the day. The Bureau will be hosting a simulator competition on the Capitol Mall, and Will Humble will be interviewed on Horizon during EMS Week.

## **VI. OLD BUSINESS:**

### **A. Update/Review/Discussion/Action on Prehospital Drugs Draft Rulemaking- Revision 4 Drafts of Regular Rulemaking for Articles 1, 2, and 10, and Exempt Rulemaking for Article 5**

Sarah Harpring reported that the prehospital drugs rulemaking task force met and considered four different versions of the draft rules. ADHS and the task force were able to reach a consensus on most of the content of the draft rules. The exception was the requirement to maintain each agent within a stable temperature range that ensures the integrity of the agent as provided by the USP/NF or the manufacturer's or distributor's labeling.

It was reported that the Bureau is drafting an economic impact statement to accompany the regular rulemaking and intends to solicit comments on the draft economic impact statement through e-mail and the Bureau website.

This rulemaking is intended to require an EMS provider's administrative medical director to oversee the use and control of prehospital drugs, and require an ALS base hospital pharmacist-in-charge to oversee the control of prehospital drugs if an EMS provider obtains all its drugs from the ALS base hospital.

The rulemaking is also intended to require temperature control of drugs when not in use. The rules would provide a delayed effective date of two years. We are anticipating the rules will take effect in January 2007; therefore the delayed effective date for temperature control would be January 2009.

It was reported that the rulemaking would increase the minimum equipment and supplies for a ground ambulance to require, among other things, that a BLS ambulance carry the minimum supply of drugs required for an EMT Basic. The rule would clarify an EMT's

authorization to administer, monitor, and assist in patient self-administration of drugs. In addition, the rule would reduce the scope of practice for an EMT-I(99) to be more consistent with the NHTSA EMT-I(99) curriculum with a two-year grandfather clause for EMT-I(99)s certified before the effective date of the rules. The rules would consolidate all the current drug lists into one table.

A Notice of Proposed Rulemaking will be filed in June, with an effective date of January 6, 2007 for the regular and exempt rulemakings.

MDC was asked to review, discuss, and provide ADHS with recommendations on the adoption of Revision 4.

A motion was made by Harvey Meislin and seconded by Daniel Spaite to approve the Prehospital Drugs Draft Rulemaking- Revision 4 Drafts of Regular Rulemaking for Articles 1, 2, and 10, and Exempt Rulemaking for Article 5.

Discussion ensued concerning drug temperature control.

Questions and concerns arose concerning drug temperature control which included:  
Why did drug control come to light?

Why is the Department enforcing a rule that has not been enforced for a long period of time?

The concerns that the Department has regarding drug temperature control are acceptable, but scientific proof of the effect of temperature control needs to be provided.

Has the Department evaluated the drug list to determine which drugs require temperature control regulations?

It was reported that the Bureau has evaluated each drug on the drug list and has read studies that have been conducted on various drugs.

A motion was made by Daniel Spaite and seconded by Wendy Ann Lucid to amend in the draft rule, R9-25-204(F)(6)(d)(ii) to read "If specified by the Medical Direction Commission and approved by the State EMS Medical Director,...."

It was reported that the Department is not authorized to delegate its decision-making authority to other bodies unless statute specifically states that authority can be delegated to other bodies. This may impact the proposed amendment to the draft rule.

The motion was amended to include the language "If specified by the Medical Direction Commission and approved by the State EMS Medical Director,..." in both temperature control provisions in the draft rules and to approve the remainder of the rules as in Revision 4.

**Motion carried**

## **VII. NEW BUSINESS:**

### **A. Review/Approval of MDC Bylaws**

It was reported that the MDC Bylaws need to be reviewed and approved at least every three years.

The only change in the bylaws was made on page 3, Article V, Section 5, which explains what qualifies as a quorum.

A motion was made by Wendy Ann Lucid and seconded by John Gallagher to approve the MDC Bylaws.

**Motion carried**

### **B. Review/Approval of PMD Bylaws**

It was reported that the PMD Bylaws were reviewed and approved at the February 16, 2006 PMD meeting.

Changes were made on page one, Article I, Purpose 2 and 9 and on page three, Article V, Section 5.

A motion was made by John Gallagher and seconded by Harvey Meislin to approve the PMD Bylaws.

**Motion carried**

### **C. Review/Discussion on new Substantive Policy Statements**

1. Approval of Medical Devices
2. Combining Enrollees for Didactic Instruction
3. Continuous Positive Airway Pressure Within EMT-P Scope of Practice
4. Interpretation of “authorized federal or state emergency response deployment” in R9-25-407

It was reported that the Bureau has adopted new Substantive Policy Statements. The Substantive Policy Statements can be viewed on the ADHS website. Copies of these are also included in the member packets.

## **VIII. CALL TO THE PUBLIC**

Member of the public requested that ADHS provide the current rule being enforced regarding EMTs practicing in hospitals.

It was stated that a paramedic may work in the hospital if he/she is performing within the paramedic scope of practice and under the supervision of an administrative medical director.

It was also explained that from a hospital licensing standpoint, this is not as clear. One of the Director’s workgroups has been charged with this issue.

It was reported that on June 15-16, 2006 the Critical Response and Emergency Systems Training (CREST) Conference will be offering training opportunities in emergency preparedness and response. The training will be held in Scottsdale at the Radisson Fort McDowell Resort.

The University of Arizona and CREST will be hosting national disaster life support courses May 5-7, 2006 in Tucson. For more information, please visit [www.crest.arizona.edu](http://www.crest.arizona.edu).

Coyote Crisis Campaign will be taking place in the Scottsdale area. The prototype will resemble what hospitals would experience in an event of an emergency.

It was reported that on May 25, 2006, a statewide stroke summit will be held.

**IX. SUMMARY OF CURRENT EVENTS**

**X. ANNOUNCEMENT OF NEXT MEETING –September 22, 2006**

**XI. ADJOURNMENT**

Meeting was adjourned at 10:30 a.m.

Minutes approved by MDC on September 22, 2006